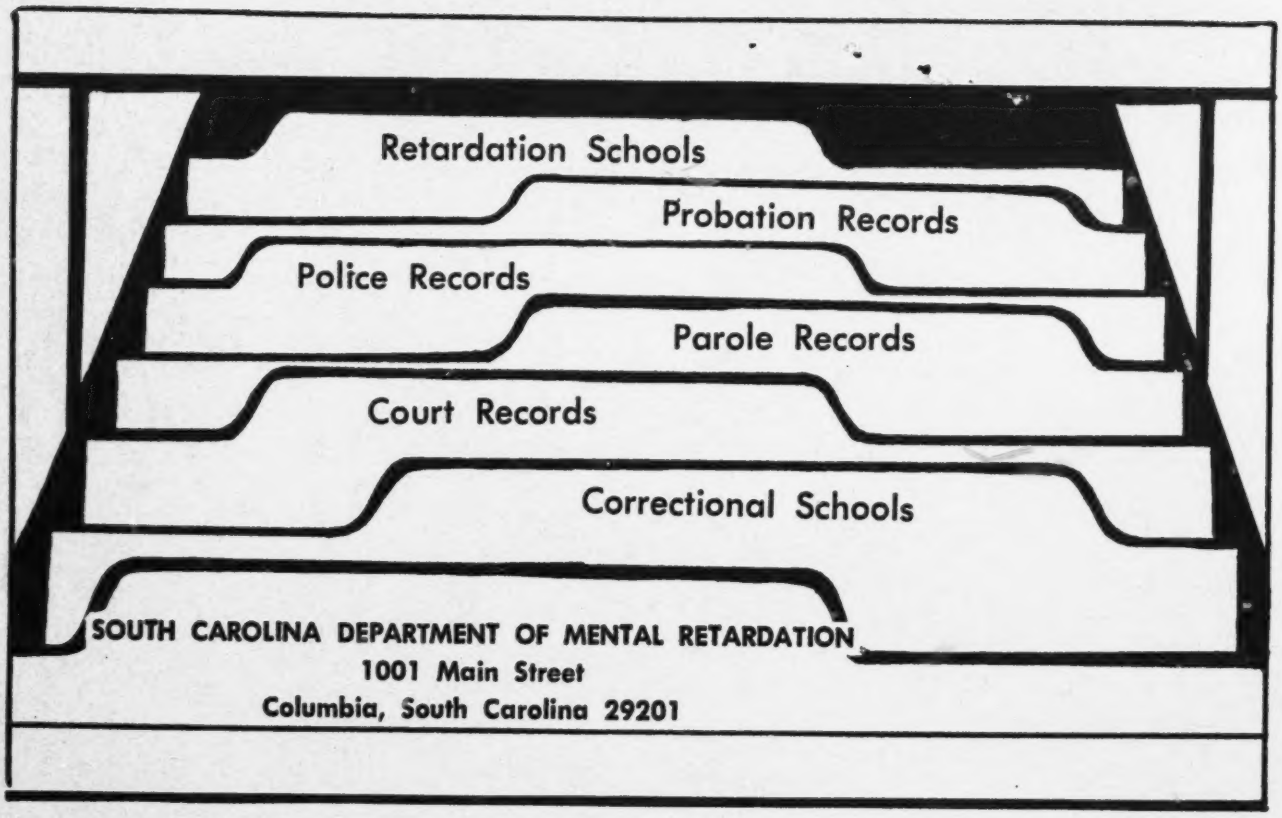
DOCUMENT RESUME

ED 037 854 EC 005 239

TITLE	File-Y:35-83:0; A Plan for the Youthful Mentally Retarded Offender.
INSTITUTION	South Carolina State Dept. of Mental Retardation, Columbia.
SPONS AGENCY	Rehabilitation Services Administration (DHEW), Washington, D.C.
PUB DATE	69
NOTE	52p.
EDRS PRICE	EDRS Price MF-$0.25 HC-$2.70
DESCRIPTORS	Delinquency Prevention, *Delinquent Rehabilitation, *Delinquents, Evaluation, *Exceptional Child Services, Identification, Inservice Education, Interagency Coordination, Juvenile Courts, *Mentally Handicapped, Police, Program Improvement, *Program Planning, Rehabilitation Centers, Rehabilitation Programs, Special Services, State Programs, Testing
IDENTIFIERS	South Carolina

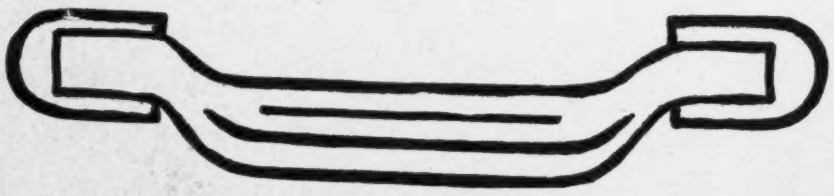
ABSTRACT

The problem of the youthful mentally retarded offender was studied and a plan devised to meet it. Recommendations called for special units for retarded offenders, placement as retardates rather than delinquents, periodic evaluation of the individual's rehabilitation program, and coordination of followup services. Further recommendations concerned development of a state system of detention-evaluation centers and of programs to identify and evaluate handicaps in offenders and to utilize local resources in care and treatment. A statewide system of juvenile courts was also proposed along with the following preventive measures: inschool testing and special placement, inservice training for professionals, interagency coordination, juvenile police divisions or officers, and agency-police cooperation. (JD)



SOUTH CAROLINA DEPARTMENT OF MENTAL RETARDATION
1001 Main Street
Columbia, South Carolina 29201

ED037854



FILE Y:35-83:0

A Plan
for the Youthful
Mentally Retarded Offender

ED052394

ED037854

FILE-Y:35-83:0

A Plan For
The Youthful Mentally Retarded Offender

U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE
OFFICE OF EDUCATION

THIS DOCUMENT HAS BEEN REPRODUCED EXACTLY AS RECEIVED FROM THE PERSON OR ORGANIZATION ORIGINATING IT. POINTS OF VIEW OR OPINIONS STATED DO NOT NECESSARILY REPRESENT OFFICIAL OFFICE OF EDUCATION POSITION OR POLICY.

DR. WALTER G. FRIES
Deputy Commissioner

S. DONALD LaBELLE, ACSW
Project Coordinator

SOUTH CAROLINA DEPARTMENT OF
MENTAL RETARDATION
1001 MAIN STREET
COLUMBIA, SOUTH CAROLINA 29201

ROY B. SUBER, M.D.
State Commissioner of Mental Retardation

WALTER G. FRIES, Ed.D.
Deputy Commissioner

MENTAL RETARDATION COMMISSION
James B. Berry, M.D., *Chairman*
R. L. Plaxico, *Vice Chairman*
Mrs. Hallie B. Perry, *Secretary*
Vince Moseley, M.D.
Richard Baker
R. B. Robinson
Robert H. Lovvorn

STATE OF SOUTH CAROLINA
DEPARTMENT OF MENTAL RETARDATION
1001 MAIN STREET
COLUMBIA, SOUTH CAROLINA 29201

OFFICE OF THE DEPUTY COMMISSIONER

March 3, 1969

The Honorable Robert E. McNair
Governor of South Carolina
State House
Columbia, South Carolina

Dear Governor McNair:

We have the honor to submit to you a report of the Department of Mental Retardation entitled, File Y:35-83:0, the South Carolina report on youthful mentally retarded offenders.

As you know, this report has been in the making for several months and is the result of the deliberations of over sixty, professional people from state and community agencies concerned with the problems of youthful mentally retarded offenders. This group has given much time and thought to the development of this study.

It is clear that there is a growing concern within our state and nation for juveniles who become or may become delinquent. This is equally true for the mentally retarded. It is our convictions that the recommendations carried in this report will afford a chance to serve those who find themselves in File Y:35-83:0.

We trust that you will find this document helpful in securing continual and additional support for the treating, preventing, and rehabilitating of youthful offenders. We welcome reactions and suggestions from you.

Sincerely,

James B. Berry

James B. Berry, M.D., Chairman
South Carolina Commission on
Mental Retardation

SOUTH CAROLINA COMMISSION ON MENTAL RETARDATION

DR. JAMES B. BERRY, JR., *Chairman*
MR. RICHARD L. BAKER
MR. ROBERT H. LOVVORN
DR. VINCE MOSELEY
MRS. HALLIE B. PERRY
MR. R. L. PLAXICO
MR. R. B. ROBINSON
DR. ROY B. SUBER, *Commissioner*

This study was supported in part by a Mental Retardation Planning Grant awarded by the Division of Mental Retardation Rehabilitation Services Administration, Social Rehabilitation Services, Department of Health, Education, and Welfare.

PREFACE

This study was earnestly done by capable, well-informed, interested people.

Although geared directly to the retarded offender, it of necessity ranged widely over the Juvenile System in this state. It spotlights the problem of the mentally retarded offender and outlines a structure for the protection of the public as well as this narrow category of public offenders.

The breadth of the study shows areas which must be changed if this state is to have in reality what is expressed by the rhetoric of the Juvenile System. Let us hope that this study shall reach practical application.

Charles M. Gibson

CHARLES M. GIBSON
Chairman, Study Group I

J McNary Spigner

JUDGE J. McNARY SPIGNER
Chairman, Study Group II

S. Donald LaBelle ACSW

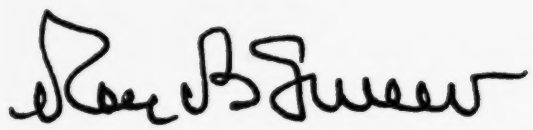
S. DONALD LaBELLE, ACSW
Project Coordinator

FOREWORD

The problem of how to deal with the Youthful Mentally Retarded Offender has become one of great concern to many state agencies and families within the state of South Carolina. As more and more facilities are developed within the state for retarded individuals, it has become most obvious that South Carolina does not have at present an adequate program or facilities to deal with this type of individual. Therefore, it was felt that a start should be made toward accessing what programs and facilities we now have for these individuals, how they could be coordinated and used to the fullest and what other additional facilities and programs would be needed at the moment and in the future.

This publication represents a summary of the situation in South Carolina and offers many recommendations as to how a beginning might be made in the state to cope with the problem. Certainly it is not a panacea nor is it a positive solution to the whole problem. However, it does reveal the thought, study, and hard work of many professional and knowledgeable people from many agencies throughout the state who contributed their time to produce this final report. It is our feeling that the report is an excellent beginning.

Roy B. Suber, M.D.
STATE COMMISSIONER OF MENTAL
RETARDATION



CONTENTS

PAGE

Summary of Recommendations Made by the Study Groups viii

Introduction xi

Summary of Project Grant 1

Procedure 2

A Look at the Need for Special Units for Youthful Mentally Retarded Offenders 5

A Look at Care and Follow-Up 8

A Look at the Need for Detention-Evaluation Centers 10

A Look at the Court and its Procedure 14

A Look at Prevention 16

APPENDIXES

I. South Carolina Department of Corrections Research Statistics 20

II. Statistics on Juveniles—Columbia Police Department 1967 21

III. South Carolina Code of Law No. 55-57.2 22

IV. Development Characteristics of the Mentally Retarded 23

V. Family Courts of South Carolina and Presiding Judges 24

VI. State Map Showing Existing Services as Indicated and Priority Areas for Future Detention Centers 25

VII. Possible Testing and Evaluation Facilities 26

VIII. Excerpts from Court Records 28

IX. Procedures in Handling Petitions to the Juvenile Courts 29

X. Suggestions for Consideration by

a. General Assembly 31

b. State, County, City, and Private Agencies 31

c. Higher Education 32

e. Community 32

XI. Summary of Special Report on Procedures for Youthful Mentally Retarded Offenders in Three States 33

YOUTHFUL RETARDED OFFENDERS PROJECT

Composition Study Group I 36

Composition Study Group II 37

Composition Study Group III 38

Special Consultants 39

Acknowledgments 40

RECOMMENDATIONS IN SUMMARY OF THE STATE PLAN FOR THE CARE AND TREATMENT OF THE YOUTHFUL RETARDED OFFENDER

The following pages contain recommendations in summary form, and the summary outline of the Youthful Retarded Offenders Project. The recommendations which have been made by the study groups do not follow a priority structure, but are presented in category form in those areas in which the study groups placed emphasis. The page number following each recommendation refers to where further explanation concerning the development of the recommendation can be found.

SUMMARY OF RECOMMENDATIONS MADE BY THE STUDY GROUPS

Recommendation Number *Page*

A LOOK AT THE NEED FOR SPECIAL UNITS FOR YOUTHFUL MENTALLY RETARDED OFFENDERS

1. That under the administration of the Department of Mental Retardation, special units for the care of the youthful retarded offender be established on the grounds of the Residential Centers for the retarded. 5

The above recommendation should be implemented with cognizance given to the following recommendations: 2, 3, 4.

A LOOK AT CARE AND FOLLOW-UP

2. That in the event a youthful mentally retarded offender is placed in a specialized unit for the retarded offender, the individual is placed in that unit as a retardate and not as a delinquent, so that in essence, any juvenile record would be eliminated. 8

3. That in the special unit, periodic evaluations be done with the youthful retarded offender in order to accertain the growth and development of the individual's rehabilitation program. 9

4. That the Department of Mental Retardation shall provide staff and develop a coordinated system of utilizing every available service, including the Department of Vocational Rehabilitation, the Department of Public Welfare, State Board of Health, OEO Programs, and other social agencies which might be utilized to follow the youngster and his family for a minimum of at least one year after discharge. 9

A LOOK AT THE NEED FOR DETENTION — EVALUATION CENTERS

5. That under the administration of the Juvenile Court System, a state-wide system of regional youth detention and evaluation centers for the juvenile public offender be developed and financed through the State of South Carolina. 11

Number *Page*

6. That within the regional detention and evaluation centers, youthful offenders be given tests and/or interviews as a screening device for the purpose of identifying those offenders who may be incapacitated by mental retardation, mental illness, physical handicaps, etc. That as identification is made, extensive evaluation be done, and this evaluation information be made available to the court prior to the disposition of the case. 12

7. That it is most desirable to place a child back into his community, and that the court in its disposition of the case, utilize local resources as part of its care and treatment of the offender, such as placement of the individual in a special education class, sheltered workshop, vocational rehabilitation, foster homes, or half-way houses. 13

A LOOK AT THE COURT AND ITS PROCEDURE

8. That a state-wide system of juvenile courts be developed and financed through the State of South Carolina, and so located that every child will have equal rights of law and appear before a juvenile judge with all services that are available to the juvenile courts. 14

A LOOK AT PREVENTION

9. That greater emphasis be placed on informing the teachers on the questions of retardation, and encouraging the school authorities to develop the necessary testing program from the time the child has contact with the school until such time as he leaves school. 16

10. It is further recommended that when an individual is identified as being a potential retardate, that special programs and classes be available within the school setting, and if not available, special education programs be developed to aid this child with his or her problems. 16

11. That the Department of Mental Retardation develop a state-wide educational program so constructed and designed that it will enable various professional disciplines to participate in in-service training programs in order to better understand and work with retardates with whom they may come in contact. 17

12. That state agencies and all other agencies, both public and private, having a responsibility to the retarded, pool their resources, in an effort to prevent duplication, for 17

the purpose of developing those special programs deemed necessary to serve the retarded.

13. That special juvenile departments or divisions of law enforcement agencies such as the Police and Sheriff's Departments be organized in metropolitan areas with the appropriately trained personnel. Where this is not possible, specially trained juvenile officers be employed in these areas. 18

14. That a liaison between the behavior serving agencies and that of the Police Academy and all law enforcement personnel be developed for the purpose of creating an ongoing, in-service training program. 18

Although recommendations five through fourteen do not relate directly to the treatment and care of the youthful mentally retarded offender, they are concerns to be considered in the overall program by various agencies and units of government in the state. Since services to the mentally retarded are not completely rendered by a single agency, the study groups found it impossible to adhere specifically to the youthful mentally retarded offender, and therefore found it necessary to examine related areas.

Hence, the complete success of a plan such as this will depend greatly on the implementation of the latter recommendations or comparable recommendations in overall state planning which becomes the jurisdiction of the Governor's Office and the General Assembly.

INTRODUCTION

The youthful mentally retarded offender presents a problem of great complexity. Those working with this type offender are faced with the overlapping of two major human conditions — intelligence and behavior — and they raise the question of what is being treated: behavior conditions, intelligence competency, or both?

The study to develop a state plan for the care, treatment, and the rendering of services to the youthful retardates who are, or show potential of being public offenders came about through the recommendations of the Governor's Interagency Council on Mental Retardation Planning, a council that was the forerunner of the now new Commission on Mental Retardation. Dr. Walter Fries, then the Executive Director of the Council, and now Deputy Commissioner of Mental Retardation for the State of South Carolina, developed the study outline and carried out its presentation and acceptance under Federal funding through the Social Rehabilitation Services of the Department of Health, Education, and Welfare, Grant No. MRP-43-B67. The study called for not only the development of a state plan for the care of the youthful retarded offender, but a secondary objective of collecting data in the areas which could be useful to other involved agencies. (See summary outline)

SUMMARY OF PROJECT GRANT

The primary objective of this grant was to develop a state plan for the care, treatment, and rendering of services to youthful retardates who are or show potential of being public offenders. The needs, conditions, and circumstances which made the achievement of such a plan significant can readily be shown.

First, there were no facilities at the three residential centers in South Carolina specifically designated for youthful retarded offenders. These persons were housed by various agencies in the state; i.e., State Hospital, county work gangs, or in the retardation centers among the other enrollees. Because the law prevented these youths from being assigned to the state industrial schools, the courts were forced to place them as described above.

Secondly, as a result of the lack of concerted efforts to bring together diverse opinions along with accurate objective data concerning the problem, there was no unanimity as to the best procedures to follow in the state related to this problem area. The courts as well as the various state agencies involved needed to agree upon a workable solution that would benefit the individual, his family, and society.

Resulting from then recent criminal court actions involving offenders who were retarded, and from efforts of the South Carolina Association for Retarded Children, public awareness of the need for action had been brought to a sharp focus. Before this time concern had not matured to the point of recognizing the need for such a plan. Therefore, it seemed a most advantageous time to develop an acceptable plan to meet the needs in this area.

PROCEDURE

Examining the problem areas confronting the youthful retarded offender brings quick realization, along with insight and understanding, that treatment, preventive measures, legal considerations, and after-care involvement becomes several factors that have to be examined in approaching the establishment of a state plan for the care and treatment of this type individual. In the initial development of the project, two basic procedures took place simultaneously: (1) the initial gathering of facts — situations, actions, circumstances — and their meanings, along with the determination of the range of disposition possible for the youthful retarded offender, and (2) the establishment of an unbiased group of men and women who could act as a force to study and recommend proper procedure for the development of a state plan.

A group of sixty professional men and women from throughout the State of South Carolina were selected from the recommendations of the Governor's Interagency Council and other professionals whose experiences and background would lend their knowledge to the study group. These sixty men and women represented cross sections of various professions, including judges, law enforcement officers, social workers, educators, etc., and were divided into two study groups, each with its own chairman.

In preparation for the meetings of the study groups, who met independently, a review of the literature and the gathering of various facts and information were secured by the Project Coordinator. Special research was conducted in order to determine the number of inmates 21 years of age and under who are presently housed in our correctional institutions, and of that number, how many have been tested and found to have an I.Q. of below 85 *(see appendix I)*. Statistics were gathered as to the nature and type of offenses committed by youthful offenders in the city of Columbia *(see appendix II)*, and also the number of cases that are handled through the Juvenile Courts. Special tours to the Correctional Schools and the facilities for the retarded were made, along with interviews with the superintendents of these facilities, judges, and probation and parole officers, in order to determine from them their experiences in dealing with the youthful retarded offender.

Actual studies of court records demonstrated that social history and background information on the offender did not, for the most

part, point out whether or not retardation was a known factor. A review of the state laws pointed out that here was a need for examination of the laws regarding the jurisdiction of the courts as it relates to the retarded offender. Present laws are not specific on this point.

The two study groups moved in their own independent directions, and it should be pointed out that not only did the structure of the two groups give diversified opinions and movements, but it also allowed for a cross check of two groups examining the same problem and comparing their individual findings. A third and separate study group met to correlate the findings and recommendations of the two groups, and from this third group, the refinements of the final recommendations and state plan emerged.

The two groups were given a variety of information that enabled them to understand the broad scope of the juvenile problem that they were looking at. Specialists were called in to discuss the areas of corrections, probation, parole, and police and court procedure as a means of aiding the study groups in directing their findings.

Special trips to correctional and retardation institutions, along with the observation of special education classes for the retarded, were made. Sub-groups made up of members of both study groups took trips to Atlanta and Augusta, Georgia for the purpose of examining this sister state's detention programs and facilities which are called Youth Development Centers.

The study groups, during the course of these meetings, recognized that in order to develop recommendations concerning the youthful retarded offender, they had to take an over-all look at the whole question of juvenile delinquency to appraise and separate directed changes as they would affect the youthful mentally retarded offender. Therefore, the recommendations that have been made in this report will not only relate to the youthful retarded offender, but to the whole continuum of the juvenile delinquency problem.

Five basic areas of concern emerged from the discussions of the two study groups: (1) arrest procedure and incarceration, (2) identification, evaluation, and court procedure, (3) court disposition of offenders, (4) after-care or follow-up, and (5) education and preventive measures.

As the study grew towards its conclusion, it was felt that as a testing technique for the project, the presentation of the preliminary findings to an outside group of professionals would be of value to the project by having reactions to the report as to the positive or negative aspects of the recommendations in serving the youthful retarded offenders. With this in mind, a Region Four Conference that was sanctioned by the Social Rehabilitative Services of HEW was held in mid-November of 1968 in Columbia, South Carolina, to which participants were invited from Florida, Tennessee, Alabama, Georgia, Mississippi, and South Carolina, to hear the Preliminary Report.

This was a unique approach, for through this work-type conference it was found that the plan had the opportunity to be aired and discussed in workshops, and then absorb the reactions and comments of the participants as part of the final Project Report. (Copies of the procedure of the Work Conference are available under separate cover through the South Carolina Department of Mental Retardation.)

A LOOK AT THE NEED FOR SPECIAL UNITS FOR YOUTHFUL MENTALLY RETARDED OFFENDERS

A primary concern facing the judicial system has been of what to do with the retarded youthful offender who comes before the courts. In this behalf, the study groups made the following recommendation:

1. **That under the administration of the Department of Mental Retardation, special units for the care of the youthful retarded offender be established on the grounds of the Residential Centers for the retarded.**

The reasoning behind this recommendation is that the courts on many occasions must carry out the dispensation of commitment of a youngster to a correctional school, and the study groups have found that the four correctional schools of South Carolina are faced with an overwhelming task of housing the number of offenders who have been sent to them. It must be pointed out that South Carolina Code of Law No. 55-57.2 provides that no person shall be committed to an institution under the control of the State Board of Industrial Schools who is epileptic, mentally ill, or mentally defective *(see appendix III)*.

Because of the present structure of commitment by the various courts, and the lack of knowledge as to the mental ability of the offenders, it was found that youthful offenders who are retarded and in some cases mentally ill, were being sent to the correctional schools. It was only after the individual had been placed within the correctional schools and had been given preliminary tests that the knowledge of his or her mental disability became known.

If the courts had been knowledgeable of the mental retardation of an offender prior to final disposition of the case, and with the availability of special units for the youthful retarded offender on the grounds of retardation centers, services geared to the welfare, training, and protection of the retarded offender could have taken place. In many cases, it was found that the court did have knowledge of retardation of an offender, and became frustrated with their inability to find proper care and service for this type child; the retarded offender was returned to the community on probation.

Early diagnosis and identification for the courts is a must,

and justification for a diagnostic program was revealed in a survey made by the South Carolina Department of Corrections for this report, where it was found that in a population of 374 inmates (age 17-21) 73 had an I.Q. of 70-84, and 29 below 70. It may be surmised that approximately the same ratio would exist in the population in the age below 17 that comes before the courts. Of course, it is recognized that I.Q. is not the single factor for determining mental capacity; many other factors must be taken into consideration in making a final determination of retardation.

There was no question in the minds of the members of the study groups that units designated for the care and treatment of the youthful mentally retarded offender should be established by the Department of Mental Retardation. These special units should be on the grounds of existing or future centers for the mentally retarded. Exact designation should be the responsibility of the Department of Mental Retardation and should be made in compliance with overall state mental retardation planning as well as planning in related areas.

These special units should be staffed with security personnel and specialists who are knowledgeable of the needs of the retarded. For a youthful offender to be assigned to these units, he will have been evaluated as being retarded, and in the judgment of the court, should be confined. The court shall refer the youth to the Department of Mental Retardation. Thereafter, complete care, treatment, control, and disposition, including release of the child, shall be the sole responsibility of the Mental Retardation Center.

Since this would be a new specialized service, it may be possible to receive staffing aid on a matching basis for a period of 51 months through P. L. 90-170.

With reference to the correctional schools, and considering the limited funds and the shortage of staff, the State Board of Juvenile Corrections has done an outstanding job in trying to create a rehabilitation program of educational and vocational endeavors; however, it is strongly felt by the study groups that as an aid to the courts, and of primary concern to the correctional schools, some form of controlled in-take procedure must take place in order to eliminate the crowding conditions that are constantly confronting these institutions.

It is not feasible for the administrators of the correctional

schools to be able to adequately work with the large numbers, which are constantly being replenished, without consideration for the value that the youngster is to receive. It was the feeling of the study groups that through proper in-take procedure, adequate funding, trained staff, and the development of a waiting list, a much improved program could be developed for those youngsters who are committed to the correctional schools.

It was strongly felt and supported by the study groups that a reception and evaluation center should be established by the South Carolina State Board of Juvenile Corrections. This center should be comprehensive and multi-disciplined and should include such services as psychological, sociological, vocational, educational, and medical evaluations. This would allow the schools to fully understand the child in order that an individual treatment plan could be developed. It was also suggested that in certain cases, the Family Court could utilize this facility to obtain necessary information to assist them in adjudicating problem cases.

Recommendation 1 should be implemented with cognizance given to the following recommendations: 2, 3, 4.

A LOOK AT CARE AND FOLLOW-UP

Recognizing that the retarded offender presents some unique problems for the court, community, and agencies serving the individual and his family, it was felt that the youthful retarded offender in the basic adjudication procedure should be looked upon as any "normal" youthful offender and, therefore, should receive all the benefits of the court's services and that of the community in working towards a solution to the problems confronting him. However, in order to assure to the person in question and the family that civil liberties are protected during this youthful period of time, with special reference to the youth's future adult civil liberties as it may relate to adult employment and military service, it is the recommendation of the study groups:

> **2. That in the event a youthful mentally retarded offender is placed in a specialized unit for the retarded offender, the individual is placed in that unit as a retardate and not as a delinquent, so that in essence, any juvenile record would be eliminated.**

Not only will the rights of the individual be protected, but the general attitude of professional staff working with the individual in a retardation setting is directed along the lines of working with a person who is retarded and not delinquent. If we were to add a stereotyped labeling of juvenile delinquent, it could raise question and cause confusion as to what is being treated, retardation or delinquency.

Staff, in working with retardates, must be free to work with the individual in an open atmosphere and not be confined within a vacuum sustained by delinquency problems. It is perfectly understood that within such specialized units, adequate security personnel will be available whose main concern is the protection of the individual because of his or her past delinquency behavior.

In establishing a treatment program for the retardate, it is recognized that this, for the most part, is not a short-term situation, but one that will require a lengthy involvement in contrast to the placement of a youth in the correctional schools where he or she can find that the commitment averages a nine-month period. In dealing with the youthful retarded offender, and with the nature of services to be rendered, the length of confinement can

be from that of a short-term evaluation stay to that of an extensive, planned training program.

Therefore, in order to protect the welfare of the child who may be placed in a specialized unit for the retarded offender, and understanding the nature of the retardate who may become an offender, the study groups recommend:

3. **That in the special unit, periodic evaluations be done with the youthful retarded offender in order to ascertain the growth and development of the individual's rehabilitation program.**

It is not enough to simply accept the possibility of placement of a youth in a specialized unit for the retarded offender and provide a highly structured treatment program without there being some plans for follow-up and care after discharge. The present structure of the Department of Mental Retardation does not lend itself to a follow-up program; therefore, the study groups recommend:

4. **That the Department of Mental Retardation shall provide staff and develop a coordinated system of utilizing every available service, including the Department of Vocational Rehabilitation, the Department of Public Welfare, State Board of Health, OEO Programs, and other social agencies which might be utilized to follow the youngster and his family for a minimum of at least one year after discharge.**

A LOOK AT THE NEED FOR DETENTION— EVALUATION CENTERS

Recognizing that the retarded offender is faced with numerable problems of personal adjustment, family concern, behavior situations, and in many cases is a product of environmental and cultural deprivations, it is a prime factor that not only must the individual be worked with, but the family as a whole must be worked with in order to prepare directed changes to receive the youth back into his community after discharge. It is felt that this work with the family must go on simultaneously with that of testing the individual. Society would be guilty of gross injustice to the youth in question if his or her return would be to the same pattern of living that existed prior to placement in a treatment program *(see appendix IV)*.

As was pointed out earlier in this report, in order for the study groups to examine the whole question of developing services for the youthful retarded offender, it became necessary for them to look at the whole continuing juvenile problem, and during the course of examining the problems, recommendations have emerged that not only pertain specifically to the youthful retarded offender, but also to the general conditions that all youthful offenders find themselves in, including the retardate who has become an offender.

The following are areas of concern that the study groups have examined for action. One of the deterents of crime that society has established is the jail; their kind and number are various. From the one-cell all-purpose facility to the modern electronically controlled structure, each serves the purpose of housing those who have rejected the law and flaunted the social standards of decency, and it goes without saying that for the most part, local jails are far from adequate in the housing of youth.

Too few facilities have been constructed with the juvenile in mind, yet our crime rate, with reference to this age group, is increasing every year. State laws differ as to the length of stay for juveniles who are to be housed in the City and County jails. Many of these facilities have separate quarters or wings for the juvenile offender, and still others have no special accommodations. The same procedure of incarceration usually applies to the juvenile offender as it does to the adult, and the psychological barriers are very apparent to the young offender, waiting endlessly in the

presence of barred windows, room or cell. Privileges are few during the early incarceration, and in some cases tears and anxiety are present, along with fear of the unknown and a mixture of varied language and noises from the drunk tank down the hall, or that adult cell block just around the corner.

In the majority of cases the jail facilities do not lend themselves to adequate staff who can be directly concerned with the youthful offender. There was no doubt in the minds of the study group members that the prime concern of immediate provisions must be made to provide adequate facilities constructed and staffed to be conducive to the detention, care, and beginning treatment of the youthful offender. Therefore, the study groups make the following recommendation:

5. **That under the administration of the Juvenile Court System, a state-wide system of regional youth detention and evaluation centers for the juvenile public offender be developed and financed through the State of South Carolina. These detention and evaluation centers should not be confused with reception and evaluation centers which were referred to earlier in this report on page 7.**

With the development of state-wide regional detention-evaluation centers, it would be imperative that these centers are so located throughout the state that they would be accessible to every county, so that the placement of a youthful offender within them would present no difficulty for law enforcement officers.

It is suggested that consideration be given to a system that would be accessible within a 50-mile radius of various cities in the state and so located as to be accessible to the present Family Courts *(see appendix V)*. It is the feeling of the study groups that such centers be established in our major metropolitan areas as a beginning point, and then develop other facilities in less populated areas. First consideration should be given to the Columbia, Greenville, Florence, and Aiken areas. Charleston is the only city in the state that presently has a County Detention Center, and consideration should be given to the involvement of this center as part of the state system *(see appendix VI)*. A State Detention Center that can be used as an example is found in Augusta, Georgia, and is called a Regional Youth Development Center. Charleston County Detention Center is another fine example. It is imperative that the State of South Carolina start to move ahead to provide the kind

of Regional Detention-Evaluation Centers that are so desperately needed for the youthful offender.

It must be emphasized that these detention centers have been called in this report detention and evaluation centers, with the latter being an important part of the service that can be rendered to the youthful offenders. The study groups felt that the important task of being able to start to help the youthful offender towards corrective understanding and treatment must be handled by adequately trained personnel who are equipped to understand the behavior pattern of the juvenile and are able to cope with the attitudes and fears juveniles possess.

These trained staff should not only include security personnel, but house parents, social workers, psychologists, medical staff and educators who are trained to work with the exceptional child in this kind of setting. With adequate facilities and trained staff, a beginning process of identification as to the problem area of the youthful offender can start to emerge. One of the basic problems facing the courts as well as others dealing with the youthful offender is the inability to identify that offender who may be retarded or presents other problems of social behavior or physical limitations. It is felt that at the time of detention, and in a facility directed towards the youthful offender, this important beginning process of identification of the youthful offender should take place, and therefore the study groups recommend:

6. **That within the regional detention and evaluation center, youthful offenders be given tests and/or interviews as a screening device for the purpose of identifying those offenders who may be incapacitated by mental retardation, mental illness, physical handicaps, etc. That as identification is made, extensive evaluation be done, and this evaluation information be made available to the court prior to the disposition of the case.**

The identification of the special problem child prior to appearance in court is of great importance in aiding the courts in determining proper directions it may want to take in adjudicating the youth in question. The evaluation that will take place following this initial screening program should include psychological, medical, and social data, and should be carried out within the detention-evaluation center. However, the study groups realized that this may not always be feasible, and, therefore, local resources that are

available should provide this necessary evaluation *(see appendix VII)*. This extensive evaluation program prior to the offender's appearance in court could suggest possible treatment and/or recommendations to the court for their dispensation of the case. This evaluation could demonstrate which youthful offenders should receive special training and services in the unit for the youthful retarded offender and which could be best served in our present correctional programs or in the community as a whole. Regardless of what the evaluation shows, it recognized that the courts have the final determination of what services are to the advantage of the youth in question, and it is the strong feeling of the study groups that no individual should be placed in a unit for the retarded offender or in a state correctional school except as a last resort. Therefore, they recommend:

7. **That it is most desirable to place a child back into his community, and that the court in its disposition of the case, utilize local resources as part of its care and treatment of the offender, such as placement of the individual in a special education class, sheltered workshop, vocational rehabilitation, foster homes, or halfway houses.**

A LOOK AT THE COURT AND ITS PROCEDURE

The State of South Carolina has developed a Uniform Juvenile Act which allows the counties to establish their own juvenile court. At the present time, there are 16 juvenile courts in the State of South Carolina *(see appendixes V and VI)*. Recognizing that the cost of operating such courts is an expensive undertaking, we find that many communities have resisted the development of a much needed juvenile program; therefore, we find that juvenile offenders are being tried in a variety of courts, each with its own separate rules of conduct, and for the most part, functioning under an adult structure. It is a known fact that many juveniles are sentenced through the probate court, magistrate court, circuit court, and recorders court, without due consideration to proper investigation and legal consideration for the juvenile. Those youngsters who are appearing in courts other than the juvenile court, could to all intents and purposes, find that they now maintain a criminal record which points out the fact that they are guilty of a given offense, and therefore could, by the nature of the courts they are tried in, lose certain citizens' rights in their adult years. The juvenile court system is so structured to prevent the child from facing this possibility. Therefore, the study groups recommend:

8. **That a state-wide system of juvenile courts be developed and financed through the State of South Carolina, and so located that every child will have equal rights of law and appear before a juvenile judge with all services that are available to the juvenile courts.**

It is through the concentrated effort of juvenile courts, in conjunction with detention-evaluation centers, that we will be able to identify special problem children and aid them in their needs to become productive citizens *(see appendix VIII for examples of case histories)*.

In speaking of the courts, it is found that our juvenile court system, since the turn of the century, has emerged as the principal adjudicative agency for processing youthful offenders. The courts were designed to reduce the stigma associated with criminal trials and were directed to rehabilitating the child rather than purely punishing him. As the court evolved, it moved more and more in the direction of a social service agency and withdrew the

emphasis upon the judicial character of the court proceedings to one of an informal structure.

The juvenile court operations and procedures have been subjected to many criticisms in recent years. The question of the Gault Decision that was handed down by the Supreme Court in May 1967 may change the whole complexity of the juvenile court system. This decision basically calls for the equal rights of the juvenile to have legal representation and follow similar procedures that are available to the adult. It is not possible to even speculate as to the extent to which the Supreme Court is prepared to go in according to juveniles the procedural safeguards available to adults in criminal proceedings. All that is clear is that the sweeping, intangible concept of due process has been officially introduced to our juvenile courts.

Within the courts, we find the case load of the juvenile probation officers is often so high as to make it meaningless to talk in terms of individual counseling and supervision. The probation counselor is faced with the task of receiving and reviewing the petitions on a given offender, and if the child is jailed, make the necessary arrangements for his or her release. Interviews with the parents and the child take place, at which time the rights of the child are explained, pointing out that legal representation should be provided by the family, and if not, that the courts can provide this service.

The probation officers gather the social history, check with the school and other social agencies that may have had contact with the child and his family. He may refer the child to a mental health agency or other agency before trial, and if necessary, place the child in a home other than his own if investigation points out the necessity of this. He will make home visits, interview members of the community, and see witnesses and interested parties in order to develop a case history that will be to the advantage of the child and the courts. This case work approach is a lengthy, time-consuming one, and is so structured to protect the rights of the child and to motivate him in the direction of positive thinking, hopefully eliminating him from the possibility of commitment to a correctional school, or a later life of adult crime *(see appendix IX)*.

A LOOK AT PREVENTION

The schools become the frontline guard in the area of prevention. We know our schools are faced with the monumental task of educating our children, and in their drive to move ahead, we may find that the size of the classes, time limitations, and the lack of knowledge concerning retardation can prevent school authorities from identifying the retarded child in the school setting. By closer coordination of services between state, county, and city agencies, along with the training of teachers as to the functions of these agencies in offering services to children and their families, it is likely that greater community action would develop. Educating teachers and school authorities in the areas of retardation, and developing early testing of all children in the school system throughout the state on an on-going basis, would enable school authorities to identify at a very early time, those youngsters who demonstrate the possibility of retardation or other handicapping situations.

In the December, 1967 Report on Special Education, by the State Department of Education, it was pointed out that approximately 8,610 children who have been classified as educable and trainable retardates are now in some 589 special education classes throughout the State of South Carolina. Each year special education classes are being developed; however, it is estimated that approximately 75,000 individuals within the State of South Carolina are mentally retarded; therefore, it becomes imperative that greater emphasis be given for special education classroom space, and trained teachers, along with ancillary professionals to meet this growing need. The immediate needs call for some 3,800 special education teachers, 2,900 teachers' aids, and an additional 1,200 specialists to handle the present expected classes in the next couple of years. Therefore the study groups recommend:

9. **That greater emphasis be placed on informing the teachers on the question of retardation, and encouraging the school authorities to develop the necessary testing program from the time the child has contact with the school until such time as he leaves school.**

10. **It is further recommended that when an individual is identified as being a potential retardate, that special programs and classes be available within the school setting, and if not available, special education pro-**

grams be developed to aid this child with his or her problems.

It is the feeling of those working in the field of retardation that the community as a whole, and professionals in particular, including doctors, lawyers judges, etc., are ill-equipped in their knowledge of retardation to adequately work with the retarded; greater knowledge of retardation and of social agencies' services becomes a professional must. Therefore, the study groups recommend:

11. **That the Department of Mental Retardation develop a state-wide educational program so constructed and designed that it will enable various professional disciplines to participate in in-service training programs in order to better understand and work with retardates with whom they may come in contact.**

In examining the various services that are available by the agencies on a state and local level, such as the Departments of Mental Retardation, Education, Vocational Rehabilitation, Welfare, and the State Board of Health, it became apparent that consideration should be given for these agencies to coordinate their services to aid the families with whom they may come in contact. It is the recommendation of the study groups:

12. **That state agencies and all other agencies both public and private, having a responsibility to the retarded, pool their resources, in an effort to prevent duplication, for the purpose of developing those special programs deemed necessary to serve the retarded.**

Pertaining to arrest procedures and incarceration, since the police officer is the first point of contact between the juvenile and the legal authorities, it is therefore imperative that the behavior of the police officer, his knowledge of youthful behavior, and his ability to understand the special problems such as retardation and emotional instability be a decisive factor in the handling of a delinquent. The national statistics are alarming, to say the least, when you recognize that juvenile crime covers a total cost of four billion dollars annually; that out of every nine children, one will be referred to the juvenile court before his 18th birthday; that half of all serious crimes are committed by persons under 18 years of age; that most arrests are of persons 15 and 16 years of age; that for every 10 arrests for auto theft, eight are committed by juveniles; that for every 10 arrests for robbery and larceny, seven

are committed by juveniles; and that for every ten arrests for burglary, five are committed by juveniles.

In the city of Columbia, South Carolina, during the year 1967, there were 874 juvenile arrests, with 1,009 charged offenses. The Sheriff's Office of Richland County also reports over 800 arrests of juveniles during this same year. The majority of the crimes committed by the juveniles were housebreaking, larceny, burglary, auto theft, petty larceny, and disorderly conduct, representing almost sixty percent (60%) of all offenses.

The police have a greater range of discretion in dealing with juveniles than they do in their relationships with adults. The police may dispense with the case in the field, dismiss the case with a warning, release the child to the parents, refer the child to the court's jurisdiction, or refer the child to other services or agencies. Of the 874 arrests in the city of Columbia, 292 were warned and released to parents, 547 were referred to the juvenile court on petition, and 32 were referred to other agencies *(see appendix II)*.

There are a number of factors that influence the police's discretion in taking action or dropping charges, such as the nature of the offense, the youth as a whole with reference to his age, associations, attitude, prior police record, family situations and attitudes. External community pressure, public awareness, internal police department attitudes and the status of the complaint of the complaintant or victim, are all factors that confront the police officers. It would be safe to say that the relevancy of factors other than delinquent conduct provides a key to the police officer's disposition. Recognizing that youth crime is one of the greatest problems of law enforcement, the study groups have made the following recommendations:

13. **That special juvenile departments or Divisions of law enforcement agencies such as the Police and Sheriff's Departments be organized in metropolitan areas with the appropriately trained personnel. Where this is not possible, specially trained juvenile officers be employed in these areas.**

14. **That a liaison between the behavior serving agencies and that of the Police Academy and all law enforcement personnel be developed for the purpose of creating an ongoing, in-service training program.**

Special programs of this nature will enable the police officer

to better understand the over-all juvenile problem with special reference to mental retardation and emotional problems of the juvenile.

Knowing that legislative changes will be a necessary procedure in the implementation of this report, subsequent legislative recommendations can serve as a guide for the establishment of some of the recommendations *(see appendix X)*.

There is no question that justice would be blind if it did not inquire into the significance of retardation as a "circumstance," and impotent if it had no dispositional variants suited to the differences it finds.

APPENDIX I

SOUTH CAROLINA DEPARTMENT OF CORRECTIONS RESEARCH STATISTICS

South Carolina Department of Corrections Statistics of 21 Years of Age and Under for 1968:

I. Number of Inmates 21 Years of Age and Under (Available Records): 374

II. Number of Inmates with I.Q. of 84 to 70: 73

III. Number of Inmates with I.Q. of 70 to 50: 26

IV. Number of Inmates with I.Q. of 50 and Below: 3

V. Number of Felonies: 470

VI. Number of Felonies Per Inmate in this Age Group: 1.25 Felonies Per Inmate

TYPES OF FELONIES COMMITTED

Assault and Battery with Intent to Ravish
Assault with a deadly weapon.
Assault and Battery of a high and aggravated nature.
Robbery (Armed and Attempted).
Storebreaking.
Housebreaking.
Larceny (Grand and Petty).
Murder.
Safecracking.
Unlawful Weapon.
Manslaughter (Voluntary and Involuntary).
Breaking and Entering.
Highway Robbery.
Accessory After Fact of Murder.
Rape (Statutory also).
Forgery.
Vagrancy.
Escape.
Malicious Mischief.
Using Auto Without Consent.
Peeping Tom.
Sending Obscene Messages over the Telephone.
Burglary.
Malicious Injury to Personal Property.
Violating Check Law.
Illegal Entry.
Auto Breaking.
Receiving Stolen Goods.
Parole Violation.
Unlawful Flight.
Conspiracy.
Re-entry—Trespassing.
Juvenile Delinquency.
Violation of Probation.
Aiding Escape of Prisoner.
Resisting Officer.
Non-Support.
Indecent Exposure.

APPENDIX II

STATISTICS ON JUVENILES—COLUMBIA POLICE DEPARTMENT 1967

Juvenile Offenses Charged in 1967

Housebreaking and Larceny and Burglary	207
Larceny of Auto or Motor Bike	91
Disorderly Conduct and Simple Assault	115
Petit Larceny	108
Larceny From Auto	20
Riding in Stolen Automobiles	3
Shoplifting	51
Vandalism and Destruction of Property	49
Incorrigibles	41
Neglected Child	1
Run Away From Home	96
Investigation and Released	39
Hold for Other Authorities	23
Grand Larceny and Robbery	10
Attempt Housebreaking	8
Drunk	6
Loafing, Loitering and Vagrancy	57
Unlawful Weapons (knife 3) (pistols 10)	13
Resisting Arrest	3
Immoral Conduct	3
Forgery	7
Escape	7
Larceny From the Mails	2
Gaming	6
Discharging Firearms in City	8
Attempt Arson (1) Arson (1)	2
Receiving Stolen Goods	5
Assault and Battery with Intent to Kill	3
Peeping Tom (1) False Fire Alarm (1)	2
Attempted Larceny of Auto (1) Purse Snatching (1)	2
Larceny From Vending Machines	8
Auto Breaking and Larceny	10
Violation of Liquor Law (1) Contempt (1) Shooting into Dwelling (1)	3
TOTAL OFFENSES	1,009

Warned and Released to Parents	292
Warned and Released After Restitution	0
Referred to Juvenile Court on Petition	547
Referred to Welfare Agency	2
Referred to Other Police Agency	31
Referred to Adult or Criminal Court	2
TOTAL ARRESTS	874

White Males	277
White Females	78
Negro Males	453
Negro Females	66

APPENDIX III

SOUTH CAROLINA CODE OF LAW NO. 55-57.2

55-57.2, Code of Laws South Carolina (1962) 1968 Cum. Supp. provides as follows:

SECTION 1. No person shall be committed to an institution under the control of the Board of State Industrial Schools who is epileptic, mentally ill or mentally defective. The court when committing such persons shall furnish a statement of such facts as can be ascertained concerning his personal and family history. If it shall develop, after a person is committed to an institution, that he is epileptic, mentally ill, mentally defective or paralytic he may be transferred by the board to such other State institution as in its judgment is best qualified to care for him in accordance with the laws of this State. But no transfer to any State mental health facility shall be made without the approval of the South Carolina Mental Health Commission.

APPENDIX IV

DEVELOPMENT CHARACTERISTICS OF THE MENTALLY RETARDED

The following is a guide that may help you in understanding the various degrees of mental retardation. This guide was established by the United States Department of Health, Education, and Welfare in 1963.

Degrees of Mental Retardation	Preschool Age 0-5 Maturation and Development	School Age 6-20 Training and Education	Adult 21 and over Social and Vocational Adequacy
Profound Under 25 I.Q.	Gross retardation; minimal capacity for functioning in sensori-motor areas; needs nursing care.	Some motor development present; may respond to minimal or limited training in self-help.	Some motor and speech development; may achieve very limited self-care; needs nursing care.
Severe 25-39 I.Q.	Poor motor development; speech is minimal; generally unable to profit from training in self-help; little or no communication skills.	Can talk or learn to communicate; can be trained in elemental health habits; profits from systematic habit training.	May contribute partially to self-maintenance under complete supervision; can develop self-protection skills to a minimal useful level in controlled environment.
Moderate 40-54 I.Q.	Can talk or learn to communicate; poor social awareness; fair motor development; profits from training in self-help; can be managed with moderate supervision.	Can profit from training in social and occupational skills; unlikely to progress beyond second grade level in academic subjects; may learn to travel alone in familiar places.	May achieve self-maintenance in unskilled or semi-skilled work under sheltered conditions; needs supervision and guidance when under mild or economic stress.
Mild 55-69 I.Q.	Can develop social and communication skills, minimal retardation in sensori-motor areas; often not distinguished from normal until later age.	Can learn academic skills up to approximately sixth grade level by late teens. Can be guided toward social conformity.	Can usually achieve social and vocational skills adequate to minimum self-support but may need guidance and assistance when under unusual social or economic stress.
Borderline 70-84 I.Q.			

APPENDIX V

FAMILY COURTS OF SOUTH CAROLINA AND PRESIDING JUDGES

Hon. Howard K. Williamson
The Family Court
Aiken, South Carolina
29801

Hon. C. B. Pearce
The Family Court
Charleston, South Carolina
29402

Hon. S. Eugene Haley
The Family Court
Anderson, South Carolina
29621

Hon. James A. K. Roper
The Family Court
Greenville, South Carolina
29601

Hon. J. Perrin Anderson
The Family Court
Greenwood, South Carolina
29646

Hon. Paul F. Haigler
The Family Court
Orangeburg, South Carolina
29115

Hon. L. E. Purdy
The Family Court
Sumter, South Carolina
29150

Hon. Jack D. Simrill
The Family Court
Rock Hill, South Carolina
29730

Hon. J. D. Montgomery
The Family Court
Camden, South Carolina
29020

Hon. J. McNary Spigner
The Family Court
Columbia, South Carolina
29201

Hon. C. Kenneth Grimsley
The Family Court
Florence, South Carolina
29501

Hon. Robert E. Gray
The Family Court
Laurens, South Carolina
29360

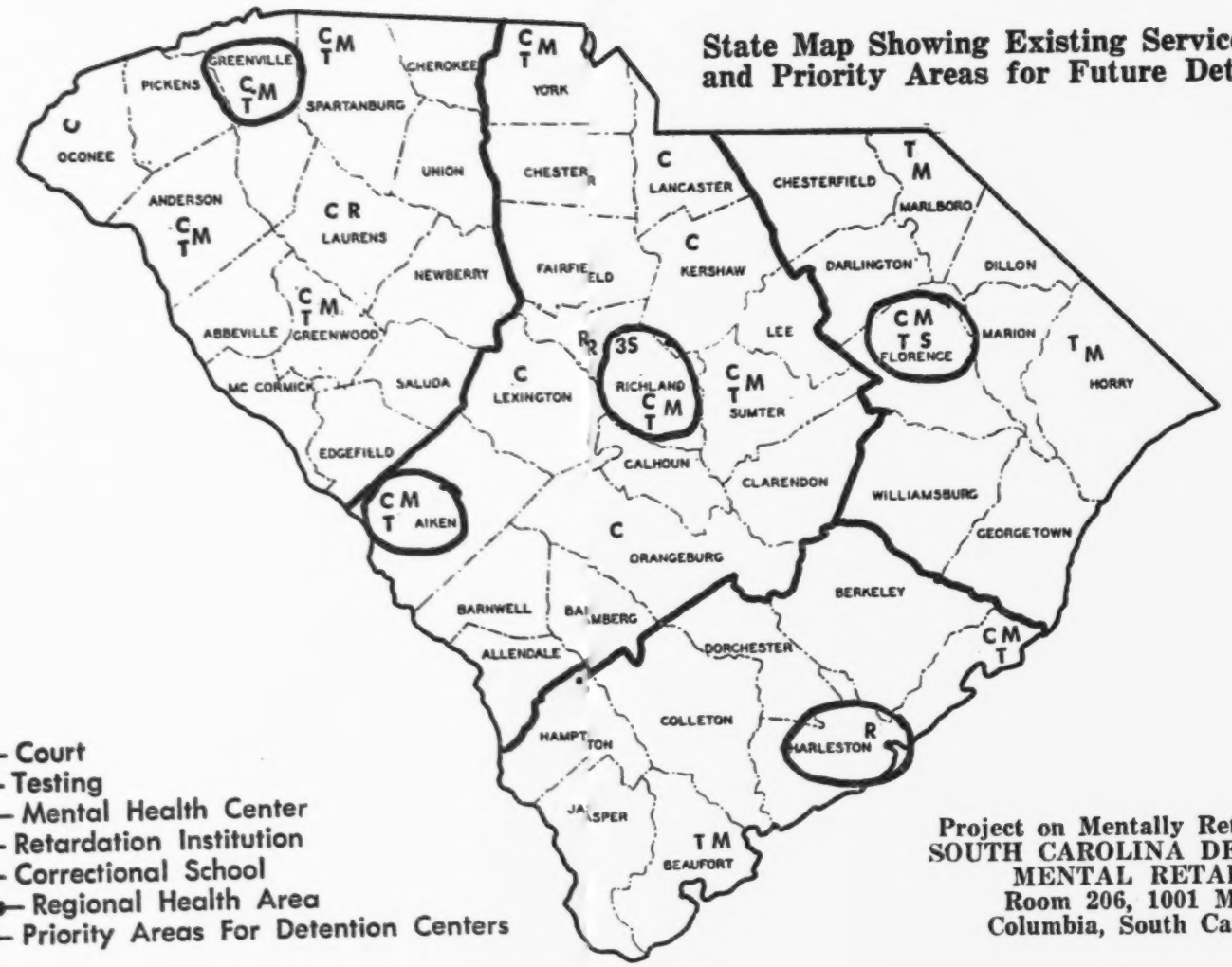
Hon. Roddy L. Bell
The Family Court
Lancaster, South Carolina
29720

Hon. Mims P. Hall
The Family Court
Lexington, South Carolina
29072

Hon. Paul S. McChesney, Jr.
The Family Court
Spartanburg, South Carolina
29301

Hon. Edward H. Ninestein
The Family Court
Walhalla, South Carolina
29691

State Map Showing Existing Services as Indicated and Priority Areas for Future Detention Centers



C — Court
T — Testing
M — Mental Health Center
R — Retardation Institution
S — Correctional School
▬ — Regional Health Area
O — Priority Areas For Detention Centers

Project on Mentally Retarded Offenders
SOUTH CAROLINA DEPARTMENT OF MENTAL RETARDATION
Room 206, 1001 Main Street
Columbia, South Carolina 29201

APPENDIX VII

POSSIBLE TESTING AND EVALUATION FACILITIES

CHARLESTON AREA

Marine Corps Air Station Grade Schools
Laurel Bay, S. C. 29902

Coastal Empire Mental Health Center
P. O. Box 610
Beaufort, S. C. 29902

S. C. Retarded Children's Habilitation Center

Moseley Diagnostic Center

Vocational Rehabilitation Dept.
41 Bee Street
Charleston, S. C.

Charleston County Mental Health Clinic
275 Calhoun Street
Charleston, S. C.

FLORENCE AREA

Evaluation and Guidance Center
400 W. Evans Street or
P. O. Box 1028
Florence, S. C.

Counseling Center
114 South Kuker Avenue
Florence, S. C. 29501

Pee Dee Mental Health Center
Route 2, Box 375-A
Florence, S. C. 29501

DARLINGTON AREA

Darlington Area Schools
Box 494
Darlington, S. C. 29523

RICHLAND AREA

Reception & Evaluation Center
S. C. Department of Corrections
1431 Lincoln Street
P. O. Box 766
Columbia, S. C. 29202

Richland-Lexington Mental Health Center
1845 Assembly Street
Columbia, S. C. 29201

S. C. Society for Crippled Children and Adults, Inc.
1517 Laurel Street
Columbia, S. C. 29201

Crippled Children's Division
State Board of Health
Marion Sims Office Building
Bull Street Extension
Columbia, S. C.

S. C. Vocational Rehabilitation Evaluation Center
West Columbia, S. C.

Child Evaluation Clinic
Maternal and Child Health Division
State Board of Health
1410 Blanding Street
Columbia, S. C. 29201

AIKEN AREA

Aiken County Mental Health Center
104 Florence Street, S. W.
Aiken, S. C. 29801

SPARTANBURG AREA

Spartanburg Area Mental Health Clinic
Spartanburg, S. C.

Spartanburg Speech and Hearing Clinic
130 West Hampton Avenue
Spartanburg, S. C.

S. C. School for the Deaf and the Blind
Spartanburg, S. C. 29302

Spartanburg School for Handicapped Children
189 N. Forest Street
Spartanburg, S. C.

BENNETTSVILLE AREA

Tri-County Mental Health Area
The Whitener Building
114 S. Marlboro Street
Bennettsville, S. C.

GREENWOOD AREA

Beckman Center for Mental Health Services
Corner Phoenix and Alexander Streets
P. O. Box 925
Greenwood, S. C.

Cerebral Palsy of Greenwood County
Edward Arms
Greenwood, S. C. 29646

Rehabilitation Workshop of Greenwood, Inc.
203 Maxwell Avenue
Greenwood, S. C. 29646

GREENVILLE AREA

Greenville Area Mental Health Center
600 County Office Building
Greenville, S. C. 29601

YORK AREA

Vocational Training Workshop, Inc.
216 E. Main Street
Rock Hill, S. C.

Rock Hill Day Care Center
1048 Oakland Avenue
Rock Hill, S. C.

York-Chester-Lancaster Mental Health Center
103 Sedgewood Drive
P. O. Box 2933
Cherry Road Station
Rock Hill, S. C. 29732

SUMTER AREA

Sumter-Clarendon-Kershaw Mental Health Center
19 E. Calhoun Street
Box 1486
Sumter, S. C. 29151

ANDERSON AREA

Anderson-Oconee-Pickens Mental Health Center
1501 N. Main Street or
P. O. Box 707
Anderson, S. C. 29622

HORRY AREA

Georgetown-Horry-Williamsburg Mental Health Clinic
706 Laurel Street or
P. O. Box 764
Conway, S. C. 29526

COLLEGES

Columbia College Guidance Center
Columbia, S. C.

University of S. C. Guidance Center
Columbia, South Carolina

Presbyterian College Guidance Center
Clinton, S. C.

Furman University Guidance Center
Greenville, S. C.

Winthrop College
Rock Hill, S. C.

S. C. State College
Orangeburg, S. C.

ADDITIONS

Civitan Community Rehabilitation Facility, Inc.
209 Liberty Street
Spartanburg, S. C.

S. C. Vocational Rehabilitation Agency
Whitten Village Rehabilitation Facility
Clinton, S. C.

S. C. Department of Vocational Rehabilitation
400 Wade Hampton State Office Bldg.
Columbia, S. C.

APPENDIX VIII

EXCERPTS FROM COURT RECORDS

CASE 1

Child in question is a 13-year-old white male who had had three previous petitions for petty larceny and housebreaking. By previous order, the child was sent to live with an uncle in a nearby city whom the court felt could be a positive influence on him. The home from which the child comes is characterized by neglect and ignorance for the care of the children. This child at the present time is in the 7th grade in Jr. High School; however, according to school records, it was indicated that he was socially promoted. In order for the court to properly determine the best treatment for him, additional information is necessary concerning his functioning abilities.

CASE 2

The child in question is a 14-year-old Negro male who seems to get along in his home setting and with his three brothers. He seems to have no respect for his mother, but relates well to his stepfather. He demonstrates, from the reports, that he is having problems in school. His teachers are unable to handle him and are going to request that he be taken out of their classes. He does not have any friends in the classes or neighborhood. He is easily lead and could get in with the wrong crowd. His previous petitions of stealing lawn mowers leads us to believe that additional evaluation should be done to determine mental capabilities.

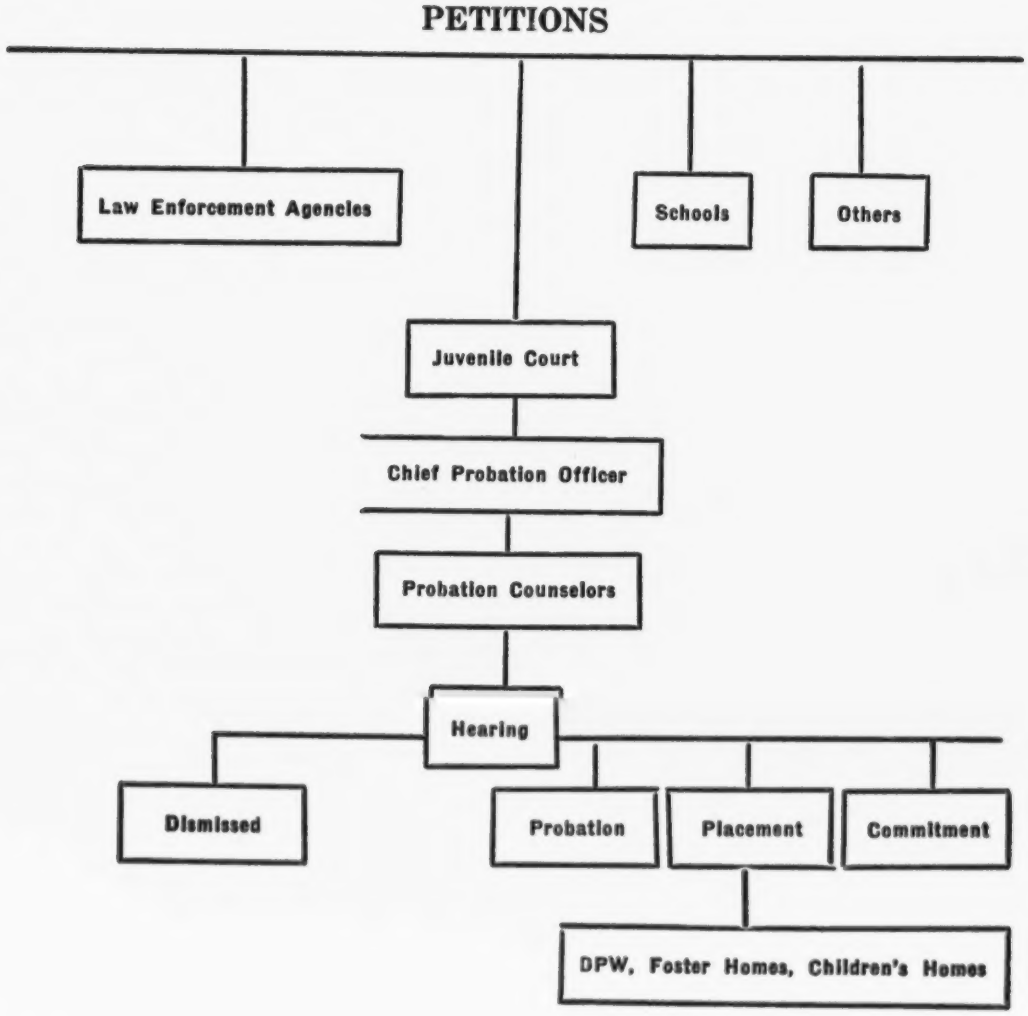
CASE 3

Child in question is a 15-year-old white female, who has appeared in court on two occasions as an incorrigible. She has a history of sexual involvement, and is suspected to have been involved with marijuana. Although she is 15 years of age, her school records indicate that she is functioning at a fourth grade level. The court is in need of additional evaluation information in order to make final determination in handling this case.

The reaction of the judges regarding these three cases was one in which they felt that all three children were retarded; however, there was no definite indication of this, and they had sought the aid of local resources in the community to aid the court in identifying the mental condition of the children. In all three cases, it was felt that under ordinary circumstances the children should possibly be sent to the correctional schools. However, it was the opinion of the court that if the children are retarded this would be of no value to them, and the court becomes frustrated without having the opportunity of full diagnostic services or screening tests to determine the mental capabilities of the children. The court further stated that if these children are evaluated as being retarded, there is no facility for the care and treatment of the retarded delinquent.

APPENDIX IX

PROCEDURES IN HANDLING PETITIONS TO THE JUVENILE COURTS



APPENDIX IX—Con't

PROCEDURES IN HANDLING PETITIONS

1. Source of Referrals.
   a. Law enforcement.
   b. Parents.
   c. Schools.
   d. Others (Injured parties).

2. Disposition of petitions (Summons).
   a. Received petitions with previous records, if any.
   b. If child is in jail makes necessary arrangements for release. (Note: Probation officer on call for the week makes visit to jails each morning and talks to the children and arranges for release.)
   c. Sets up initial interview with parents and child.
      1. Explains why the child is in court and the probation Counselor's role.
      2. Explains the rights of the child and the right to be represented by an attorney, private or court appointed.
      3. Checks with the school.
      4. If felt the child needs help and upon the approval of the parent, the child may be referred to the Mental Health agencies or other social agencies before trial.
      5. Help obtain legal assistance if required or needed.
      6. If placement other than the home is indicated, will investigate and make recommendations at hearing.
      7. Visit home before hearing, if possible.
      8. Have case scheduled for hearing.
      9. See that all witnesses and interested parties are notified of hearing date.

4. After hearing Actions.
   a. If child needs placement, make the arrangements.
   b. If placed on probation, work with child in the following areas:
      1. If referred to Mental Health, Vocational Rehabilitation or other agencies, see that child and parents, if required, keep appointments.
      2. Make periodic visits to home.
      3. If child has school problems work closely with schools.
      4. Be available to child and parents when needed.

5. Main purpose of probation is getting involved in the life of the child—Rehabilitation.

APPENDIX X

SUGGESTIONS FOR CONSIDERATION BY

GENERAL ASSEMBLY

1. Creation of a state-supported family court system.
2. Elimination of juvenile jurisdiction by magistrates, recorders, and probate judges, or
   a. Magistrates, recorders, and probate judges should have no authority to commit youthful offenders to correctional schools or chain gangs without review by the Family Court.
3. All juvenile cases other than traffic should be adjudicated by Family Courts only.
4. Development of a state-wide system of regional detention centers under the administration of the Family Courts.
   a. Thus eliminating placement of juvenile offenders in local jail facilities.
   b. Within the detention center, beginning screening and diagnosis of the juvenile offender as to the individual's capacities.
5. Examination of the total juvenile laws of South Carolina with special reference to the laws dealing with the juvenile offender.
6. Provide funds for the creation and administration of a reception and evaluation center for youthful offenders under the administration of the Board of Juvenile Corrections.
   a. Develop proper controlled in-take procedures at the four correctional schools, thus eliminating over-crowded conditions.
7. Encourage our law enforcement departments throughout the state to create special juvenile departments and staff, or have available on staff specially trained juvenile officers.
8. Appropriate additional funds for the creation of more special education classes in the public schools.

STATE, COUNTY, CITY, AND PRIVATE AGENCIES

1. Coordinate services and develop inter-agency communications on all levels.
2. Develop services of utilizing inter-agency staff on a consultation basis and actual services basis.
3. Develop clear definitions that are uniform for all agencies who are serving youth as to what is a "child," what is an "adolescent," or in general, what is a "juvenile."
4. Develop public relations techniques in order for the public to be aware of the various services available to the community.

APPENDIX X —Con't

SUGGESTIONS FOR CONSIDERATION BY

5. Law enforcement department to carry out an educational program as to the role of the police officer with special reference to reaching the elementary and secondary school age child.
6. In the public schools, development of mandatory on-going programs and continued use of such results for determining the child's capacity to function in the public school setting. This testing should take place at least every two years.
   a. From such on-going programs, early detection of special problems could be forthcoming and treated.

HIGHER EDUCATION

1. Develop additional faculty members to expand special education departments.
   a. If no special education department exists, every effort should be to develop one.
2. Recruitment for the special education department's students to become trained teachers to enter into this important area of need, i.e., manpower needs, and publication.
3. Develop further special education classes and seminars as an aid to teachers already in the field.
4. Develop training programs in the field of law enforcement that could eventually develop into a four-year degree program.

COMMUNITY

1. Encourage local School Boards to develop special education classes in their schools.
2. Become more aware of the role of the Family Court in serving the local community.
3. Encourage the involvement of local law enforcement officers to become actively involved in community affairs.
4. Encourage local legislators to be aware of special problems with reference to mental retardation and delinquency, and for them to appropriate the necessary funds to create additional services.
5. To be aware of the local resources available within their community for family and youth, and where services are not available, to take the necessary steps to encourage their development.

APPENDIX XI

SUMMARY OF SPECIAL REPORT ON PROCEDURES FOR YOUTHFUL MENTALLY RETARDED OFFENDERS IN THREE STATES*

To aid in the development of services to the retarded offender in South Carolina, the practices of three states (Texas, Washington, and Ohio) were examined. The goal was to ascertain their procedures and concerns in establishing treatment programs for these youths that have been committed to their state correctional institutions.

All three states have similar laws to that of South Carolina, in that no individual who is mentally defective should be sent to state correctional schools.

As was pointed out in this report and as one of the recommendations suggests, in order for the judge to be able to determine if an offender is retarded, it would be necessary to have prehearing testing and evaluations. This procedure is not done in any of the three states. The Directors and Superintendents of the correctional schools visited expressed the feeling that this procedure would be of immense value. All youthful offenders whether retarded or not are committed to these states' youth authorities for placement in their reception-evaluation centers. It is in these centers, after extensive testing and consideration of the offense, that treatment determination is made and the youth is assigned to one of the correctional schools. The schools are so designed to meet the different age and special treatment needs of the individual as well as the nature of the offense. Thus, if a youthful offender is retarded and in need of special education, he is assigned to a correctional school having such a program.

In the State of Texas, the referral to the reception-evaluation center becomes a firm commitment for placement in a correctional school regardless of his mental capacity, with the exception of mental illness. If it is found that a youngster is mentally ill, he is

*This report by Mr. Donald LaBelle was made possible through a special task force study group under the South Carolina Governor's Committee on Criminal Administration and Juvenile Delinquency.

transferred to a facility designed specifically for this purpose. However, a youth who is mentally retarded is incorporated into the institutional setting and placed in a correctional school where specific treatment programs and the educational structure is directed towards the retarded offenders. Thus, for the purpose of agency responsibility, the offense factor rather than the handicap becomes the determiner.

In the State of Washington, a similar procedure takes place with the exception that if in the judgment of the social service staff of the school where the retarded offender is placed, the retarded student demonstrates a level of retardation that the schools' staff feels they cannot handle properly, the staff will refer the individual to an interagency staff committee. This committee is composed of representatives from retardation and corrections who review the case and make final recommendations as to which institution is best able to serve the youth. If it is the judgment of both staffs that the individual is best served through the retardation institutions, then he will be transferred to such a facility. If it is felt that the continued service in the correctional school is to his advantage, then suggested treatment programs will be reviewed and the child will remain in the correctional institution. In the event that a center for the mentally retarded feels that a youngster who has been placed in their institution has become a behavior problem to the extent that they feel he needs security care, then they may in turn request an interagency staff conference to request a transfer to the correctional schools. Here again, in the State of Washington, every effort is made to create a program and develop treatment in keeping with the mental level of the individual that is sent to the correctional schools.

The State of Ohio's in-take procedure is similar to that of the two previously mentioned states with the exception that, following the period of stay in the reception-evaluation center, which is six weeks, compared to eight weeks in Washington and two weeks in Texas, the recommendation of the center is sent to a special Classification Division who then makes the determination as to what steps should be taken in the placement of a youngster. It is at this time that the Classification Division could make a recommendation to the State Agency for mental retardation for placement of a

retarded offender in one of their institutions, but long waiting lists usually preclude the recommendation.

Long waiting lists for service at institutions for retardates in all three states have made the need apparent that specialized programs are a necessary part of the correctional school in order to accommodate retarded offenders. In each case special education teachers are employed to teach in the correctional schools that receive mentally retarded offenders. Where the nature of the offense is such as to allow it, community resources are used as placement for retarded offenders rather than maintaining them within institutions. This is accomplished by parole officers who are involved from the very beginning of the adjudication procedures and who recommend this type of placement after reception and evaluation has shown that the offender is mentally retarded.

The correctional authorities in all three states agreed that evaluation at the time a youthful offender is placed in a detention center awaiting adjudication would be to the advantage of both the correctional schools and the courts. This procedure would greatly aid the courts in determining the disposition of youthful retarded offenders; i.e., whether to send them to state correctional institutions, to community resources, or to request mental retardation centers to accept them.

YOUTHFUL RETARDED OFFENDERS PROJECT

Composition Study Group I

Gibson, Charles, Chairman	Attorney	Charleston
Armstrong, Robert	State Department of Education	Columbia
Ashe, Mabel B.	Superintendent, Riverside School for Girls	Columbia
Belt, Lonnie	Council on Alcoholism	Columbia
Bostic, John	Chief Probation Officer, Domestic & Family Court	Columbia
Cannon, Clarence	Lt., Columbia Police Department	Columbia
Chandler, Charles	Coordinator, Vocational Rehabilitation Planning Program	Columbia
Cone, Ferebe	Supervisor, Staff Developing and Training, DPW	Walterboro
Doskocil, Carl	Department of Mental Health	Columbia
Dusenbury, Joe	Administrative Assistant, S. C. Dept. of Voc. Rehab.	Columbia
Edwards, Johnette	Trident Forum for Handicapped	Charleston
Fields, Richard	Attorney	Charleston
Gaskins, Sara	Field Supervisor, Spartanburg DPW	Spartanburg
Grant, Walter Henry	St. Johns Mission	Charleston
Gordon, Kay Black	State Department of Education	Columbia
Harter, Edward	Director, Legal Services Agency	Columbia
Hoover, Larry	Coordinator, HIP, Pineland	Columbia
Huff, Charles (Mrs.)	Past President, S. C. Association for Retarded Children	Rock Hill
Insalaco, Carl	Department of Psychology, USC	Columbia
Johnson, Daisy	Director, Urban League	Columbia
Karesh, Janice L.	Trident Forum for Handicapped	Charleston
Lourie, Isadore	Member, House of Representatives	Columbia
McCall, Ruth	Social Worker, State Board of Health	Columbia
McCuen, Richard	Supt., John G. Richards School for Boys	Columbia
McIntosh, John	Public Defenders Office	Columbia
Morgan, David	Assistant Research Director Department of Corrections	Columbia
Page, Delaine	Pineland State Training School	Columbia
Rondeau, Edward A.	Supt., Pineland State Training School	Columbia
Shivers, Jack	Director, State Juvenile Board of Corrections	Columbia
Simrill, Jack D. (Judge)	The Family Court	Rock Hill
Snyder, Eloise	Ph.D.	Columbia
Zeigler, Eugene N.	Senator	Florence

YOUTHFUL RETARDED OFFENDERS PROJECT

Composition Study Group II

Spigner, J. McNary, Chairman	Judge, Domestic & Family Court	Columbia
Brockington, William J.	Senator	Columbia
Carpenter, Helen	Child Welfare Consultant, York County DPW	York
Carver, Richard E.	Senior Case Work Supervisor, Greenville County DPW	Greenville
Clay, Mary	Employment Counselor, Youth Opportunity Center	Columbia
Compton, George O.	Superintendent, S. C. School for Girls	Columbia
Corder, Owen	Supervisor, Division of Special Education	Columbia
Dubose, Harvey	Supervisor of Education, Department of Corrections	Columbia
Dye, Kenneth	Coordinator, HIP, Pineland	Columbia
Green, William B., III	Psychologist, Pineland	Columbia
Grogam, George B.	Workshop & Facilities Officer, S. C. Dept. of Voc. Rehab.	Columbia
Herman, Lillian	Pineland State Training School	Columbia
Howell, Tom	Pineland State Training School	Columbia
Huckabee, Norman M.	Superintendent, S. C. School for Boys	Florence
Hunter, James E.	Reverend, Buncombe Methodist Church	Greenville
Hurley, Alice	Social Worker, Richland School District	Columbia
Halford, Raymond	Assistant Attorney General	Columbia
McLendon, Walser	Executive Director, Associated Social Agencies	Columbia
Medlock, Travis	Member, House of Representatives	Columbia
Moss, Elizabeth	Case Work Supervisor, Greenwood County DPW	Greenwood
Rondeau, Edward A.	Superintendent, Pineland State Training School	Columbia
Rosenblume, Arthur		Charleston
Sandick, Bernard A.	State Board of Juvenile Corrections	Columbia
Schleimer, Edward	Charleston Mental Health Clinic	Charleston
Simmons, William Henry	Judge	Charleston
Spivey, W. Bryant	Chaplain, Pineland State Training School	Columbia
Thompson, B. L.	Office of Vocational Rehabilitation	Charleston
Southerlin, Deborah	Chief, Child Welfare Services, DPW	Columbia
Watts, Henry	Area Supervisor, Office of Voc. Rehab.	Columbia
Westrope, Martha	Dr., Psychologist	Greenville
Williams, Jack	Public Defenders Office	Columbia

YOUTHFUL RETARDED OFFENDERS PROJECT

Composition Study Group III

Mr. Robert Armstrong
Mr. John Bostic
Lt. Clarence Cannon
Mr. Joe Dusenbury
Mr. Charles Gibson
Mrs. Kay Black Gordon
Mrs. Lillian Herman
Mrs. Alice Hurley
Mr. James Lococo
Mr. Travis Medlock
Miss Ruth McCall
Mr. David Morgan
Dr. Edward A. Rondeau
Mr. Jack Shivers
Judge Jack D. Simrill
Dr. Eloise Snyder
Judge J. MacNary Spigner
Mrs. Virginia Stewart
Dr. Martha Westrope

YOUTHFUL RETARDED OFFENDERS PROJECT

Special Consultants

Ashe, Mabel B.	Superintendent, Riverside School for Girls	Columbia
Banks, Therell	Superintendent, Regional Youth Development Center	Augusta, Ga.
Beckman, Sterling	Personnel Director, Department of Corrections	Columbia
Blanchard, Gordon	Director, Youth Development Center	Augusta, Ga.
Bostic, John	Chief Probation Officer, Family Court	Columbia
Brangon, Adah	Director of Education, Pineland	Columbia
Cannon, Clarence, Lt.	Columbia Police Department	Columbia
Cauthern, William, Capt.	Columbia Police Department	Columbia
Cicienia, Ebert F.	Superintendent, S. C. Habilitation Center	Charleston
Compton, George O.	Superintendent, S. C. School for Girls	Columbia
Copeland, Redick	Secretary, Department of Mental Retardation	Columbia
Corry, Claude B.	State Department Family and Children's Services	Atlanta, Ga.
Davey, Charles	Chief Probation Officer, Family Court	Charleston
Fries, Walter G.	Deputy Commissioner, Department of Mental Retardation	Columbia
Golden, Kenneth	State Planning and Grants	Columbia
Hope, James K.	Director, Juvenile Placement Bureau	Columbia
Huckabee, Norman M.	Superintendent, S. C. School for Boys	Florence
Hudson, Robert	Coordinator, Andrew Jackson School	Columbia
Kent, Gordon	Director, Vocational Rehabilitation, Pineland	Columbia
Lanford, John S. Jr., Judge	Fulton County Juvenile Court	Atlanta, Ga.
Leeke, William	Director, Department of Corrections	Columbia
Lococo, James	HEW Consultant, Planning and Grants	Columbia
McCuen, Richard	Superintendent, John G. Richards School for Boys	Columbia
Moore, Edward	Assistant Supervisor, Juvenile Placement Bureau	Columbia
Moyer, Clifford	Director, S. C. Police Academy	Columbia
Myers, Webster	Professor of Law, USC	
Powell, Frank	Sheriff, Richland County	Columbia
Rondeau, Edward A.	Superintendent, Pineland	Columbia
Seigler, R. E.	Warden, Reception & Evaluation Center	Columbia
Shivers, Jack	Director, Juvenile Board of Corrections	Columbia
Simrill, Jack, Judge	York County Family Court	York
Spigner, J. McNary, Judge	Richland County Family Court	Columbia
Stewart, Virginia	Coordinator, Residential Services Department of Mental Retardation	Columbia
Tillman, Curtis V., Judge	DeKalb County Juvenile Court	Atlanta, Ga.

STAFF

S. Donald LaBelle, ACSW
Project Coordinator

Lovera Robertson
Project Secretary

ACKNOWLEDGMENTS

Cover design by John Wolff